

BEST AVAILABLE COPY**PATENT APPLICATION FEE DETERMINATION RECORD**
Effective October 1, 2000

Application or Docket Number

09939722

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| TOTAL CLAIMS | | | |
|----------------------------------|--|--------------|--------------------------|
| FOR | | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | | 13 minus 20= | 0 |
| INDEPENDENT CLAIMS | | 6 minus 3 = | 3 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|------------------------------------------------|----------------------------------|-------|------------------------------------|---------------|
| | Total | Minus | ** 20 | = |
| Independent | 6 | Minus | *** 0 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> | |

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITYRATE RATE

BASIC FEE 355.00

BASIC FEE 710.00

X\$ 9= X\$18= X40= X80= 240 +135= +270= TOTAL TOTAL 950 SMALL ENTITY OR OTHER THAN
SMALL ENTITYRATE RATE X\$ 9= X\$18= X40= X80= +135= +270= TOTAL TOTAL ADDIT. FEE

(Column 1)

(Column 2) (Column 3)

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|------------------------------------------------|----------------------------------|-------|------------------------------------|---------------|
| | Total | Minus | ** | = |
| Independent | • | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> | |

RATE RATE X\$ 9= X\$18= X40= X80= +135= +270= TOTAL TOTAL ADDIT. FEE

(Column 1)

(Column 2) (Column 3)

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|------------------------------------------------|----------------------------------|-------|------------------------------------|---------------|
| | Total | Minus | ** | = |
| Independent | • | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> | |

RATE RATE X\$ 9= X\$18= X40= X80= +135= +270= TOTAL TOTAL ADDIT. FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.